

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/501,211
Filing Date	07/13/2004
First Named Inventor	Francisco José RICO NOVELLA
Title	METHOD OF SENDING AND VALIDATING
Art Unit	
Examiner Name	
Attorney Docket Number	600.004

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:



Practitioners associated with the Customer Number:

000058152

OR



Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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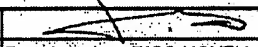
Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	Francisco José RICO NOVELLA	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required; see below.



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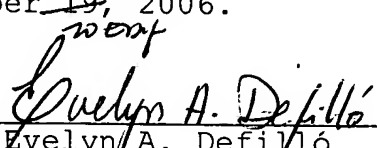
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DOCKET No.: 600.004

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Evelyn A. DeFillio
Registration No. 45,630

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>Emilio San Vicente Gargallo</i>	Date	
Name	Emilio SANVICENTE GARGALLO	Telephone	
Title and Company			

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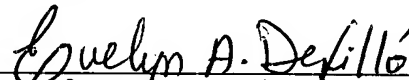
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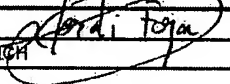
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Signature		Date	
Name	Jordi FORGA ALBERICH	Telephone	
Title and Company			

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Signature		Date	
Name	Jorge MATA DIAZ	Telephone	
Title and Company			

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Signature

Date

Name

Juan Jose ALINS DELGADO

Telephone

Title and Company

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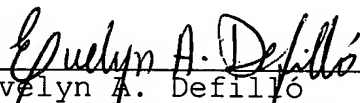
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Signature		Date	
Name	Luis Javier BEDIA CRUZ LOPEZ	Telephone	
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